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REMARKS/ARGUMENTS

The present amendment is submitted in an earnest effort to advance the case to issue without delay.

Applicants seek to receive the benefit of their earlier filing date under 35 U.S.C. 119(e). A sentence has been inserted subsequent to the title claiming this priority.

Claim 5 was objected to under 37 C.F.R. § 1.75(a). The word "displaced" was correctly identified as a typographical error. Claim 5 has now been amended by deleting the word "displaced".

Claims 1-7 were rejected under 35 U.S.C. § 102(b) as anticipated by US Patent 6,571,003 B1 (Hillebrand et al.). Applicants traverse this rejection.

Claim 1 has been amended to indicate that transformation is derived from a study by expert graders. The study calculated consumer perceivable skin attributes conducted on panelists with no treatment/product use. Support is found at page 11 (lines 9-10). Digitally transformed images are tiled beside the initial image. Support is found at page 9 (lines 25-26). Use of a digital camera and Internet transmission of images finds support at page 13 (lines 10-11).

Claims 1-7 were rejected under 35 U.S.C. § 102(b) as anticipated by Hillebrand et al. (US Patent 6,571,003 B1). Applicants traverse this rejection.

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A major distinction over the reference is applicants' use of a model program based on an expert grader assessed study. In the present invention, the model program which conducts transformation of an image is focused on an underlying attribute problem rather than mere rote image changes. Minor changes in a consumer's image are ignored. Only perceptual thresholds of noticeability are registered. This avoids a consumer becoming frustrated with a bunch of side by side image transformations that are indistinguishable to an ordinary person. Thus, perceivability is quite important. This is accomplished through knowledge of the expert study pre-programmed to the transformation.

By contrast, Hillebrand et al. processes images on a specific area. Both the clinically relevant and irrelevant are captured and recorded in this prior art system. Without an expert based study input to the transformation, there can be no distinction of relevant and irrelevant clinical features. Hillebrand et al. brush out any deformities. Applicants rely on a documented study that generates a model person with actual perceivable changes over a period of time.

Not only do applicants change a deformity itself, but the deformity is coordinated with other changes that have impact. For instance, color shade has effect upon wrinkle perception. These multiple changes are all factored into the model study against which the consumer image is evaluated. Hillebrand et al. moves from one attribute to another; there is no consideration of any interaction.

The present claims are not anticipated by Hillebrand et al. The reference does not disclose an expert grader study which becomes the basis for modeling transformations. Neither does the reference disclose side by side placement of the initial and the transformed displayed images. Without the side by side display, it becomes extremely

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difficult for a consumer in a forced selection to adequately pick differences among the transformations. Claims 6 and 8-10 further recite a digital camera for Internet transmission. The Internet feature is not found in the reference. For all these reasons, the claims are neither anticipated nor rendered obvious by the reference.

In view of the foregoing amendment and comments, applicants request the Examiner to reconsider the rejection and now allow the claims.

Respectfully submitted,

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